

APPENDIX A

Permit Application Forms



General Information for All Permit Applications

I. FACILITY INFORMATION - Complete the following:

A. Type of Application: ☒ New

☐ Renewal

☐ Modification

B. Physical Location:

Concord Expansion Compressor Station

Facility Name

Mammoth Road

Street

Pelham

NH 03076

Town/City

State Zip Code

C. Mailing Address:

1001 Louisiana Street

Street/P.O. Box

Houston

TX

77002

Town/City

State

Zip Code

(713) 420-7931

Telephone Number

D. USGS

Coordinates:

UTM

Easting: 307131

Northing: 4739290

or

Latitude/Longitude

N Latitude:	Deg 42	Min 47	Sec 1.735
W Longitude:	Deg 71	Min 21	Sec 28.367

E. Owner:

Tennessee Gas Pipeline Company

Company

1001 Louisiana Street

Street/P.O. Box

Houston

TX 77002

Town/City

State Zip Code

(713) 420-7931

Telephone Number

F. Parent Corporation:

El Paso Corporation

Company

N/A

Contact Person/Title

1001 Louisiana Street

Street/P.O. Box

Houston

TX

77002

Town/City

State

Zip Code

(713) 420-7931

Telephone Number

G. Contact Information

1. General/Technical Contact:

Trinh Tran

Contact Person

Principal Eng. Eastern Pipelines Env.

Title

1001 Louisiana Street

Address

Houston

TX 77002

Town/City

State Zip Code

(713) 420-7931

Telephone Number

Trinh.M.Tran@ElPaso.com

E-mail Address

2. Application Preparation:

Tetra Tech EC, Inc.

Company

Tricia Beazley

Contact Person

133 Federal Street, 6th Floor

Address

Boston

MA

02110

Town/City

State

Zip Code

(617) 457-8243

Telephone Number

tricia.beazley@tteci.com

E-mail Address

3. Legal Contact:

Scott Miller

Contact Person

Senior Counsel

Title

1001 Louisiana Street

Address

Houston TX 77002

Town/City State Zip Code

(713) 420-2336

Telephone Number

E-mail Address

4. Invoicing Contact:

Trinh Tran

Contact Person

Principal Eng. Eastern Pipelines Env.

Title

1001 Louisiana Street

Address

Houston TX 77002

Town/City State Zip Code

(713) 420-7931

Telephone Number

Trinh.M.Tran@ElPaso.com

E-mail Address

H. Major Activity or Product Descriptions - List all activities performed at this facility and provide SIC code(s):

Description of Activity or Product	SIC Code
Natural Gas Compressor Station	4922

I. Other Sources or Devices - List sources or devices at the facility (other than those that are the subject of this application) that are permitted pursuant to Env-A 600:

Source or Device	Permit #	Expiration Date
N/A		

II. Total Facility Emissions Data:

Pollutant	CAS #	Actual (lb/hr)	Potential (lb/hr)	Actual (ton/yr)	Potential (ton/yr)
NOx (as NO2)	10102-44-0	Unknown	5.66	Unknown	24.81
CO	630-08-0	Unknown	7.63	Unknown	33.41
VOC	N/A	Unknown	2.02	Unknown	8.85
SO2	7446-09-5	Unknown	0.20	Unknown	0.87
PM	N/A	Unknown	0.39	Unknown	1.72

Note: For Regulated Toxic Air Pollutants list name and Chemical Abstract Service Number (CAS #) – use additional sheets if necessary.

III. Support Data *The following data must be submitted with this application:*

- ☒ A copy of all calculations used in determining emissions;
- ☒ A copy of a USGS map section with the site location clearly indicated; and
- ☒ A to-scale site plan of the facility showing:
 1. the locations of all emission points;
 2. the dimensions of all buildings, including roof heights; and
 3. the facility's property boundary.

IV. Certification (To be completed by a responsible official only):

I am authorized to make this submission on behalf of the affected source or affected units for which this submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the information submitted in this document and all of its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

Print/Type Name: William (Bill) G. CopeTitle: VP OperationsSigned: William G. CopeDate: 1/25/08



Information Required for Permits for Fuel Burning Devices

I. EQUIPMENT INFORMATION – Complete a separate form for each device.

Device Description: Emergency Generator

Date Construction

Commenced: 2008

Device Start-Up Date: October 2009

A. Boiler ☒ Not Applicable

Boiler Manufacturer

Boiler Model Number

Boiler Serial Number

Gross Heat Input Nameplate Rating (MMBtu/hr)

Burner Manufacturer

Burner Model Number

☐ gal/hr
☐ mmcf/hr
☐ ton/hr

Burner Serial Number

Potential Fuel Flow Rate

1. Type of Burner:

a. Solid Fuel:

- ☐ Cyclone
☐ Pulverized (☐ wet ☐ dry)
☐ Spreader Stoker
☐ Underfeed Stoker
☐ Overfeed Stoker
☐ Hand-Fired
☐ Fly Ash Re-injection
☐ Other (specify): _____

b. Liquid Fuel:

- ☐ Pressure Gun
☐ Rotary Cup
☐ Steam Atomization
☐ Air Atomization
☐ Other (specify): _____

c. Gaseous Fuel:

- ☐ Natural Gas
☐ Propane
☐ Other (specify): _____

2. Combustion Type:

- ☐ Tangential Firing ☐ Opposite End Firing ☐ Limited Excess Firing ☐ Flue Gas Recirculation
☐ Staged Combustion ☐ Biased Firing ☐ One End Only Firing
☐ Other (specify): _____

B. Internal Combustion Engines/Combustion Turbines

☐ Not Applicable

TBD

Manufacturer

TBD

Model Number

TBD

Serial Number

TBD

Fuel Flow Rate

☐ gal/hr
☐ mmcf/hr

425

☒ hp
☐ kW

Engine Output Rating

Auxiliary power source

Reason for Engine Use

C. Stack Information

Is unit equipped with multiple stacks? ☐ Yes ☒ No (if yes, provide data for each stack)

Identify other devices on this stack: N/A

Is Section 123 of the Clean Air Act applicable? ☐ Yes ☒ No

Is stack monitoring used? ☐ Yes ☐ No

If yes, Describe: _____

Is stack capped or otherwise restricted? ☐ Yes ☒ No

If yes, Describe: _____

Stack exit orientation: ☒ Vertical ☐ Horizontal ☐ Downward

TBD

Stack ☐ Inside Diameter (ft) ☐ Exit Area (ft²)

TBD

Discharge height above ground level (ft)

TBD

Exhaust Flow (acfm)

TBD

Exhaust Velocity (ft/sec)

TBD

Exhaust Temperature (°F)

II. OPERATIONAL INFORMATION

A. Fuel Usage Information

1. Fuel Supplier:

Tennessee Gas Pipeline Company

Supplier's Name

1001 Louisiana Street

Street

Houston

TX 77002

Town/City

State Zip Code

(713) 420-2600

Telephone Number

2. Fuel Additives:

N/A

Manufacturer's Name

Street

Town/City

State Zip Code

Telephone Number

Identification of Additive

Consumption Rate (gallons per 1000 gallons of fuel)

3. Fuel Information (List each fuel utilized by this device):

Type	% Sulfur	% Ash	% Moisture (solid fuels only)	Heat Rating (specify units)	Potential Heat Input (MMBtu/hr)	Actual Annual Usage (specify units)
nat gas	<0.001	N/A	N/A	Unknown	4.68*	Unknown

B. Hours of Operation

Hours per day: 24 Days per year: 20.8 (based on 500 hours of operation per year)

III. POLLUTION CONTROL EQUIPMENT ☒ Not Applicable

A. Type of Equipment *Note: if process utilizes more than one control device, provide data for each device*

- | | |
|---|---|
| <input type="checkbox"/> baffled settling chamber | <input type="checkbox"/> wide bodied cyclone |
| <input type="checkbox"/> long cone cyclone | <input type="checkbox"/> irrigated long cone cyclone |
| <input type="checkbox"/> multiple cyclone (_____ inch diameter) | <input type="checkbox"/> carbon absorption |
| <input type="checkbox"/> electrostatic precipitator | <input type="checkbox"/> irrigated electrostatic precipitator |
| <input type="checkbox"/> spray tower | <input type="checkbox"/> absorption tower |
| <input type="checkbox"/> venturi scrubber | <input type="checkbox"/> baghouse |
| <input type="checkbox"/> afterburners (incineration) | <input type="checkbox"/> packed tower/column |
| <input type="checkbox"/> selective catalytic reduction | <input type="checkbox"/> selective non-catalytic reduction |
| <input type="checkbox"/> reburn | |
| <input type="checkbox"/> other (specify): _____ | |

B. Pollutant Input Information

Pollutant	Temperature (°F)	Actual (lb/hr)	Potential (lb/hr)	Actual (ton/yr)	Potential (ton/yr)

Method used to determine entering emissions:

- ☐ stack test ☐ vendor data ☐ emission factor ☐ material balance
☐ other (specify): _____

C. Operating Data

1. Capture Efficiency: _____% Verified by: ☐ test ☐ calculations
2. Control Efficiency: _____% Verified by: ☐ test ☐ calculations
3. Normal Operating Conditions (*supply the following data as applicable*)

_____ Total gas volume through unit (acfm)	_____ Temperature (°F)	_____ Percent Carbon Dioxide (CO ₂)
_____ Voltage	_____ Spark Rate	_____ Milliamps
_____ Pressure Drop (inches of water)	_____ Liquid Recycle Rate (gallons per minute)	

IV. DEVICE EMISSIONS DATA:

Pollutant	Temperature (°F)	Actual (lb/hr)	Potential (lb/hr)	Actual (ton/yr)	Potential (ton/yr)
NOx (as NO2)	> 0	Unknown	0.11	Unknown	0.47
CO	> 0	Unknown	0.21	Unknown	0.94
VOC	> 0	Unknown	0.05	Unknown	0.23
SO2	> 0	Unknown	0.0002	Unknown	0.0007
PM	> 0	Unknown	0.003	Unknown	0.0117

Method used to determine exiting emissions:

- ☐ stack test ☐ vendor data ☒ emission factor ☐ material balance
☒ other (specify): NSPS EMERGENCY ENGINE EXHAUST
EMISSION LIMITS

STATE OF NEW HAMPSHIRE
Department of Environmental Services
Air Resources Division

Form
ARD-2



Information Required for Permits for Fuel Burning Devices

I. EQUIPMENT INFORMATION – Complete a separate form for each device.

Device Description: Compressor Turbine #1 (with SoLoNOx Combustion System)

Date Construction

Commenced: 2008

Device Start-Up Date: October 2009

A. Boiler ☒ Not Applicable

Boiler Manufacturer

Boiler Model Number

Boiler Serial Number

Gross Heat Input Nameplate Rating (MMBtu/hr)

Burner Manufacturer

Burner Model Number

☐ gal/hr
☐ mmcf/hr
☐ ton/hr

Burner Serial Number

Potential Fuel Flow Rate

1. Type of Burner:

a. Solid Fuel:

- ☐ Cyclone
☐ Pulverized (☐ wet ☐ dry)
☐ Spreader Stoker
☐ Underfeed Stoker
☐ Overfeed Stoker
☐ Hand-Fired
☐ Fly Ash Re-injection
☐ Other (specify): _____

b. Liquid Fuel:

- ☐ Pressure Gun
☐ Rotary Cup
☐ Steam Atomization
☐ Air Atomization
☐ Other (specify): _____

c. Gaseous Fuel:

- ☐ Natural Gas
☐ Propane
☐ Other (specify): _____

2. Combustion Type:

- ☐ Tangential Firing ☐ Opposite End Firing ☐ Limited Excess Firing ☐ Flue Gas Recirculation
☐ Staged Combustion ☐ Biased Firing ☐ One End Only Firing
☐ Other (specify): _____

B. Internal Combustion Engines/Combustion Turbines

☐ Not Applicable

Solar

Manufacturer

Centaur 50-6200LS

Model Number

Unknown

Serial Number

0.056 @ 40 deg. F

Fuel Flow Rate

☐ gal/hr
☒ mmcf/hr

6,346 @ 40 deg. F

☒ hp
☐ kW

Engine Output Rating

For use in NG Compressor Station

Reason for Engine Use

C. Stack Information

Is unit equipped with multiple stacks? ☐ Yes ☒ No (if yes, provide data for each stack)

Identify other devices on this stack: N/A

Is Section 123 of the Clean Air Act applicable? ☐ Yes ☒ No

Is stack monitoring used? ☐ Yes ☒ No

If yes, Describe: _____

Is stack capped or otherwise restricted? ☐ Yes ☒ No

If yes, Describe: _____

Stack exit orientation: ☒ Vertical ☐ Horizontal ☐ Downward

6.0

Stack ☒ Inside Diameter (ft) ☐ Exit Area (ft²)

88,588

Exhaust Flow (acfm)

924

Exhaust Temperature (°F)

55.0

Discharge height above ground level (ft)

52.22

Exhaust Velocity (ft/sec)

II. OPERATIONAL INFORMATION

A. Fuel Usage Information

1. Fuel Supplier:

Tennessee Gas Pipeline Company

Supplier's Name

1001 Louisiana Street

Street

Houston

TX 77002

Town/City

State Zip Code

(713) 420-2600

Telephone Number

2. Fuel Additives:

N/A

Manufacturer's Name

Street

Town/City

State Zip Code

Telephone Number

Identification of Additive

Consumption Rate (gallons per 1000 gallons of fuel)

3. Fuel Information (List each fuel utilized by this device):

Type	% Sulfur	% Ash	% Moisture (solid fuels only)	Heat Rating (specify units)	Potential Heat Input (MMBtu/hr)	Actual Annual Usage (specify units)
nat gas	<0.001	N/A	N/A	8141Btu/hp.hr	52.2*	Unknown

B. Hours of Operation

Hours per day: 24 Days per year: 365

III. POLLUTION CONTROL EQUIPMENT ☒ **Not Applicable****A. Type of Equipment** *Note: if process utilizes more than one control device, provide data for each device*

- | | |
|---|---|
| <input type="checkbox"/> baffled settling chamber | <input type="checkbox"/> wide bodied cyclone |
| <input type="checkbox"/> long cone cyclone | <input type="checkbox"/> irrigated long cone cyclone |
| <input type="checkbox"/> multiple cyclone (_____ inch diameter) | <input type="checkbox"/> carbon absorption |
| <input type="checkbox"/> electrostatic precipitator | <input type="checkbox"/> irrigated electrostatic precipitator |
| <input type="checkbox"/> spray tower | <input type="checkbox"/> absorption tower |
| <input type="checkbox"/> venturi scrubber | <input type="checkbox"/> baghouse |
| <input type="checkbox"/> afterburners (incineration) | <input type="checkbox"/> packed tower/column |
| <input type="checkbox"/> selective catalytic reduction | <input type="checkbox"/> selective non-catalytic reduction |
| <input type="checkbox"/> reburn | |
| <input type="checkbox"/> other (specify): _____ | |

B. Pollutant Input Information

Pollutant	Temperature (°F)	Actual (lb/hr)	Potential (lb/hr)	Actual (ton/yr)	Potential (ton/yr)

Method used to determine entering emissions:

- ☐ stack test ☐ vendor data ☐ emission factor ☐ material balance
☐ other (specify): _____

C. Operating Data

1. Capture Efficiency: _____ % Verified by: ☐ test ☐ calculations
 2. Control Efficiency: _____ % Verified by: ☐ test ☐ calculations
 3. Normal Operating Conditions (*supply the following data as applicable*)

Total gas volume through unit (acfm)	Temperature (°F)	Percent Carbon Dioxide (CO ₂)
Voltage	Spark Rate	Milliamps
Pressure Drop (inches of water)	Liquid Recycle Rate (gallons per minute)	

IV. DEVICE EMISSIONS DATA:

Pollutant	Temperature (°F)	Actual (lb/hr)	Potential (lb/hr)	Actual (ton/yr)	Potential (ton/yr)
NOx (as NO2)	0	Unknown	5.46	Unknown	23.9
CO	0	Unknown	7.33	Unknown	32.1
VOC (as UHC)	0	Unknown	1.96	Unknown	8.6
SO2	0	Unknown	0.21	Unknown	0.9
PM	0	Unknown	0.40	Unknown	1.7

Method used to determine exiting emissions:

- ☐ stack test ☒ vendor data ☒ emission factor ☐ material balance
☐ other (specify): _____